



PREVENTING YOUTH VIOLENCE

PROGRAM ACTIVITIES GUIDE

Preventing Youth Violence

The Facts

Violent injury and death disproportionately affect adolescents and young adults in the United States. Although homicide rates have dropped in recent years, rates remain unacceptably high.

Data from the Centers for Disease Control and Prevention's (CDC) Web-based Injury Statistics Query and Reporting System (WISQARS) indicate that homicide is the second leading cause of death among 15- to 24-year-olds overall. In this age group, homicide is the number one cause of death among African Americans, the second leading cause of death among Hispanics, and the third leading cause of death among American Indians. In 2002, 5,219 youth ages 15 to 24 were murdered—an average of 14 per day.

Violence does not have to be fatal to greatly affect individuals and communities. Estimates from the National Electronic Injury Surveillance System suggest that more than 589,000 youth ages 15 to 24 were treated for nonfatal, assault-related injuries in U.S. hospital emergency departments in 2002. That is 111 nonfatal injuries for every violence-related death.

Although nonfatal acts of violence are relatively common on school property, most acts of fatal and violent crime occur outside of school. CDC's School-Associated Violent Deaths Study found that fewer than 1% of all violent deaths among school-age children occur in schools. From July 1, 1994, through June 30, 1999, 253 violent deaths (students, teachers, and others) occurred on school property, on the way to or from school, at school events, or on the way to or from school events. These data highlight the need for prevention programs that address risk for violent behaviors on and off school property, including school-, family-, and community-based programs.

CDC's violence prevention research is intended to have practical implications and immediate relevance. Studies about risk and protective factors are conducted to guide prevention programs and policies. Evaluation studies determine how well these programs work and identify those with the greatest impact. This information is crucial in implementing effective prevention programs in schools and communities.

Key Partners

Preventing youth violence requires the support and contributions of many partners: other federal agencies, state and local health departments, nonprofit organizations, academic institutions, international agencies, and private industry. Partners help in a variety of ways, including collecting data about violence, learning about risk factors, developing strategies for prevention, and ensuring that effective prevention approaches reach those in need.

New Directions

CDC is moving the injury and violence-prevention field toward primary prevention and early intervention by exploring ways to prevent youth violence before it occurs. CDC's key activity areas for violence prevention include:

- Surveillance,
- Research,
- Capacity building,
- Communication,
- Partnership, and
- Leadership.

CDC's violence prevention activities are guided by four key principles:

- An emphasis on primary prevention,
- A commitment to advancing the science of prevention,
- A focus on translating scientific advances into practical application through effective programs and policies, and
- A commitment to building on the efforts of others by addressing gaps or needs.

Additional information about CDC's youth violence prevention programs and activities is available at www.cdc.gov/injury.

Monitoring, Tracking, and Researching the Problem

National Violent Death Reporting System

State and local agencies have detailed information from medical examiners, coroners, police, crime labs, and death certificates that could answer important, fundamental questions about trends and patterns in violence. However, the information is fragmented and difficult to access. CDC has funded 17 states—Alaska, California, Colorado, Georgia, Kentucky, Maryland, Massachusetts, New Mexico, North Carolina, New Jersey, Oklahoma, Oregon, Rhode Island, South Carolina, Utah, Virginia, and Wisconsin—to establish the National Violent Death Reporting System (NVDRS) to gather, share, and link state-level data about violence. When fully implemented, NVDRS will enable CDC to pull together vital state-level information to gain a more accurate understanding of the problem of violence and to enable policy makers and community leaders to make educated decisions about violence prevention strategies and programs, including those that address youth violence.

Contact: Etiology and Surveillance Branch
770-488-4410 ohcinfo@cdc.gov

National Electronic Injury Surveillance System

The National Electronic Injury Surveillance System (NEISS), operated by the U.S. Consumer Product Safety Commission, provides data about all nonfatal injuries treated in U.S. hospital emergency departments. CDC uses NEISS data to generate national estimates of nonfatal injuries, including those related to youth violence.

Contact: Etiology and Surveillance Branch
770-488-4410 ohcinfo@cdc.gov

Examining Sociocultural and Community Risk and Protective Factors

CDC is funding researchers at the University of Georgia to examine sociocultural and community risk and protective factors that are associated with child maltreatment and early risk factors for youth violence. The results from this research will inform the development of violence prevention strategies for communities.

Contact: Etiology and Surveillance Branch
770-488-4410 ohcinfo@cdc.gov

School-Associated Violent Deaths Study

In partnership with the Departments of Education and Justice, CDC has conducted a national study of school-associated violent deaths since 1992. Data from 1994 to 1999 were published in the *Journal of the American Medical Association* in 2001. Findings revealed that there were 220 events resulting in 253 deaths from July 1, 1994, through June 30, 1999. Most events were homicides involving firearms. While the total number of events has decreased steadily each year, the total number of multiple victim events appears to have increased. This ongoing study plays an important role in monitoring trends in school violence, identifying risk factors for school violence, and assessing the effects of prevention efforts.

Contact: Etiology and Surveillance Branch
770-488-4410 ohcinfo@cdc.gov

Assessing Links Between Various Forms of Violence

CDC is conducting a study to identify the links between different forms of violent behaviors in adolescents. The study will help scientists understand the prevalence and consequences of different types of aggressive behaviors; the association between dating violence and other forms of peer violence; and the manner in which these types of violent behaviors vary by sex, developmental stage, and other factors.

Contact: Etiology and Surveillance Branch
770-488-4410 ohcinfo@cdc.gov

Exploring Exposure to Media Violence

CDC is funding Internet Solutions for Kids, Inc. and the University of Michigan to examine the association between exposure to violent media, particularly new media such as the internet and video games, and youth violence. Researchers are assessing the specific aspects of media that are likely to contribute to risk for violence and are identifying factors that mediate or moderate the association between violent media and violent behavior.

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Youth Risk Behavior Surveillance System

CDC's Youth Risk Behavior Surveillance System (YRBSS) is designed to monitor priority health risk behaviors that contribute to the leading causes of death, disability, and social problems among youth and adults in the United States, including behaviors that contribute to unintentional injuries and violence. The YRBSS consists of national, state, and local school-based surveys of representative samples of 9th through 12th grade students. The school-based surveys are conducted biennially and provide information on a variety of suicide and interpersonal violence-related behaviors both on school property and in the community.

Contact: Division of Adolescent and School Health
1-888-231-6405 healthyouth@cdc.gov

Healthy Passages

Healthy Passages is a multiyear longitudinal study to help families, schools, communities, and health care providers understand how children grow to be healthy, educated, and productive members of society. It will help explain why young people make choices that lead to healthy behaviors or risky behaviors. Data collection began in fall 2004 and will provide information on a variety of injury and violence issues including individual and family factors associated with bullying and how behaviors change over time.

Contact: Division of Adolescent and School Health
1-888-231-6405 healthyouth@cdc.gov

Developing and Evaluating Prevention Strategies

National Academic Centers of Excellence on Youth Violence

CDC has established ten National Academic Centers of Excellence on Youth Violence to foster joint efforts between university researchers and communities to address the problem of youth violence. The Centers' primary objectives include the following:

- Partner with community agencies in developing and monitoring a community-wide youth violence surveillance system;
- Conduct risk and protective factor research in youth violence;
- Conduct efficacy and effectiveness trials in the community;
- Develop collaborations involving scholars and practitioners in areas ranging from medicine and public health to criminology and the social sciences;
- Provide training in violence prevention including the development and implementation of courses in the social sciences, public health, and medicine and predoctoral and postdoctoral training and mentoring opportunities; and

- Identify, engage, or partner with representatives from numerous, diverse local organizations to formulate community-based plans for violence prevention.

Funded centers include:

- University of California, Riverside
- University of California, San Diego
- University of Hawai'i at Manoa
- University of Michigan, Ann Arbor
- University of Alabama at Birmingham
- Harvard University, Boston
- Columbia University, New York
- Johns Hopkins University, Baltimore
- Virginia Commonwealth University, Richmond
- University of Puerto Rico, San Juan

Contact: Division of Violence Prevention
770-488-4362 ohcinfo@cdc.gov
www.safeyouth.org

Middle School Violence Prevention Project

CDC is funding a multisite trial of a violence prevention program aimed at middle school students. Thirty-seven middle schools in four states are participating. The program being evaluated teaches students conflict resolution and problem-solving skills, trains teachers about violence prevention, and engages family members in program activities. The project—affiliated with Virginia Commonwealth University, the University of Illinois at Chicago, the University of Georgia, and Duke University—represents one of the largest efforts to date to assess the effectiveness of school-based violence prevention among middle schoolers.

Contact: Prevention Development and
Evaluation Branch
770-488-4646 ohcinfo@cdc.gov

Youth Violence Prevention through Community-Level Change

CDC is funding researchers at the University of Michigan to examine Youth Empowerment Solutions for Peaceful Communities (YES) and assess whether interventions designed to change community structures and social processes can reduce rates of youth violence

in communities. The YES project provides youth with opportunities to prevent youth violence and create community change; enhances the ability of neighborhood organizations to engage youth; and changes the social and physical environment to reduce and prevent violence. The project includes youth empowerment activities, neighborhood organization development, and community development programs.

Contact: Prevention Development and
Evaluation Branch
770-488-4646 ohcinfo@cdc.gov

School Health Policies and Programs Study

The School Health Policies and Programs Study (SHPPS) is a national survey conducted periodically to assess school health policies and programs at the state, district, school, and classroom levels. SHPPS was first conducted in 1994 and was repeated in 2000. SHPPS provides information on health education, programs, environmental strategies, and policies that states, districts and schools use to address violence and suicide prevention.

Contact: Division of Adolescent and School Health
1-888-231-6405 healthyouth@cdc.gov

Supporting and Enhancing Prevention Programs

Preventing Violence through Education, Networking and Technical Assistance (PREVENT)

CDC is funding the University of North Carolina Injury Prevention Research Center to develop a national training program for violence prevention practitioners. PREVENT works with individuals and organizations to build skills in identifying community needs and assets, creating and mobilizing partnerships, developing and implementing prevention programs, measuring success, and funding and sustaining programs.

Contact: www.prevent.unc.edu
919-966-2251 prevent@unc.edu

Enhancing State Capacity to Address Child and Adolescent Health through Violence Prevention (ESCAPE)

CDC's ESCAPE program is developing capacity and leadership in preventing violence toward or among children and adolescents, including youth suicide, child maltreatment, teen dating, sexual violence, school violence, community violence and bullying. The planning and implementation phases of this project address the intersection of shared risk and protective factors. Funded states are Colorado, Iowa, Massachusetts, Michigan, Minnesota, New Mexico, Rhode Island, and Virginia.

Contact: Program Implementation and
Dissemination Branch
770-488-1424 ohcinfo@cdc.gov

Providing Prevention Resources

National Youth Violence Prevention Resource Center

In January 2001, CDC launched a Web-based resource for those interested in working toward the prevention of youth violence and suicide. The National Youth Violence Prevention Resource Center serves as a central source for information and materials gathered from institutions, community-based organizations, and federal agencies working to prevent violence among our nation's youth. The Center's website, toll-free hotline, and fax-on-demand service offer access to prevention information, publications, research and statistics, and fact sheets. The website links parents, teens, and researchers to materials designed specifically for those audiences. Each month, the Center hosts more than 37,000 website visitors, fulfills more than 500 requests for publications and youth violence prevention materials, and responds to more than 100 public inquiries and requests for technical assistance.

Contact: www.safeyouth.org
1-866-SAFEYOUTH

Best Practices of Youth Violence Prevention: A Sourcebook for Community Action

Best Practices of Youth Violence Prevention: A Sourcebook for Community Action is a publication designed to help communities develop and implement youth violence prevention programs. The sourcebook presents four key strategies for preventing youth violence: school-based programs, mentoring programs, parenting- and family-based programs, and home visiting. The sourcebook builds upon lessons learned from the first CDC-funded evaluation projects and draws upon the expertise of more than 100 of the nation's leading scientists and practitioners. *Best Practices* is also available in Spanish. Copies of the publication may be ordered online or by phone.

Contact: www.cdc.gov/injury
770-488-1506

Assessment Tool for School Environments

CDC is supporting the development of a tool to assess the physical characteristics of schools that can contribute to feelings of safety, increase prosocial behavior, and decrease aggressive behavior. The tool uses the Crime Prevention Through Environment Design (CPTED) framework. The core principles of CPTED include reducing opportunities for crime, enhancing natural surveillance of activities, and reinforcing a sense that the environment is cared for and that problems will be addressed.

Contact: Etiology and Surveillance Branch
770-488-4410 ohcinfo@cdc.gov

Compendium of Assessment Tools for Youth Violence

CDC has updated *Measuring Violence-Related Attitudes, Behaviors, and Influences Among Youths: A Compendium of Assessment Tools*. The compendium provides researchers and prevention specialists with measures to assess the factors associated with youth violence and a set of tools to evaluate prevention programs. Copies of the publication may be ordered online or by phone.

Contact: www.cdc.gov/injury
770-488-1506

School Health Index

The *School Health Index* is a self-assessment and planning tool that enables a school to identify the strengths and weaknesses of its health and safety policies and programs; develop an action plan for improving student health and safety; and involve teachers, parents, students, and the community in improving school services. The current edition of the *School Health Index*, including unintentional injury and violence prevention items, is available at www.cdc.gov/nccdphp/dash/SHI/index.htm.

Contact: Division of Adolescent and School Health
1-888-231-6405 healthyyouth@cdc.gov

School Health Guidelines to Prevent Unintentional Injuries and Violence

The *School Health Guidelines to Prevent Unintentional Injuries and Violence* help state and local educational agencies and schools promote safety and teach students the skills needed to prevent injuries and violence. They provide guidance for all components of a coordinated school health program for all grade levels. The *Guidelines* were developed by CDC in collaboration

with specialists from universities and from federal, state, and local agencies and organizations. This guidance is based on an in-depth review of research, theory, and current practice in unintentional injury, violence, and suicide prevention; health education; and public health. The *Guidelines* are available at www.cdc.gov/HealthyYouth/injury/guidelines/index.htm.

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1-888-231-6405 healthyyouth@cdc.gov

Encouraging Research and Development

CDC's extramural research program funds and monitors varied research on violence and injury prevention.

Children Exposed to Spousal Violence

The University of Washington's Harborview Injury Prevention and Research Center (HIPRC) is researching health and educational outcomes among children exposed to spousal violence.

Mary Kerner, PhD 206-521-1556

Youth Violence Prevention and Injury Reduction Initiative

The University of Pittsburgh's Center for Injury Research and Control is conducting a study to determine if early identification of at-risk youth and timely referral to community-based programs can reduce injury recidivism and the number of violent events in the area. The study targets youth ages 14 to 25 who have been admitted to the hospital for treatment of a violence-related injury.

Hank Weiss, PhD 412-648-2600

Promoting Biculturalism to Prevent Youth Violence

Researchers from the University of North Carolina at Chapel Hill are developing and testing an intervention that attempts to prevent aggressive behavior and suicide in Latino youth by promoting bicultural coping skills and family cohesion.

Mimi V. Chapman, BA, MSSW, PhD 919-843-8282

Child Fatality Review Team

CDC is funding the Harvard Injury Control Research Center to develop a Child Fatality Review Team Module to augment information collected on child deaths in the National Violent Death Reporting System (NVDRS).

David Hemenway, PhD 617-432-3420

Reducing Violence and Victimization in Assaulted Urban Youth

The University of Wisconsin-Milwaukee is conducting a study to examine the effectiveness of a violence prevention program aimed at reducing aggressive behavior in African-American adolescents who have experienced violent crime.

Michael R. McCart, MS 414-229-2932

Preventing Youth Violence in Inner-city Neighborhoods

The University of Alabama at Birmingham's Injury Control Research Center is rigorously evaluating a violence prevention program in several impoverished neighborhoods in Mobile, Alabama. The program stresses early intervention for at-risk youth. Findings will inform the development of new approaches to address violence among inner-city youth.

Philip R. Fine, PhD, MSPH 205-934-7845

Intentional Injury among Urban Youth

Harvard University's Center for Injury Research and Control is conducting a study to increase the understanding of the risk factors and prevalence of intentional injury among urban youth. The project involves 6,000 youth residing in 80 Chicago neighborhoods.

David Hemenway, PhD 617-432-4493

Violence toward Peers, Dates, and Self

Researchers from the University of North Carolina at Chapel Hill are examining the interrelationships among peer-, date-, and self-directed violence to identify risk factors from four levels of influence: individual, peer, family, and neighborhood.

Vangie A. Foshee, PhD 919-966-6616

Preventing Adolescent Dating Violence

Researchers from the University of North Carolina at Chapel Hill are developing and pilot testing a family-based program to address multiple types of youth violence, victimization, and perpetration.

Vangie A. Foshee, PhD 919-966-6616

Youth Employment and Youth Violence: Is Work a Viable Intervention?

The University of North Carolina Injury Prevention Research Center is exploring the potential of youth employment to reduce youth violence. Researchers will use data from the National Longitudinal Study of Adolescent Health to examine the relationship between employment during adolescence and violence-related behaviors.

Carol W. Runyan, PhD, MPH 919-966-3916

Media Literacy as a Violence Prevention Strategy

Researchers at the University of California–Los Angeles are evaluating *Beyond Blame: Challenging Violence in the Media*, a media literacy violence prevention curriculum. The study will be conducted in randomly selected seventh-grade classrooms throughout Los Angeles County.

Jess F. Kraus, PhD, MPH 310-794-2706

Study of Sibling Violence among Foster Children

Researchers from the New York University School of Medicine are conducting assessments on 260 African American and Latino siblings in foster care. Given their history of exposure to family violence, the group is at high risk for psychological problems, disruptions in school competence, and perpetration of sibling violence. The identification of modifiable risk and protective factors in the social ecology of foster care is a crucial first step in effective prevention of sibling violence among foster children.

Lourdes Oriana Linares, PhD 212-263-8847

Risk for Sexual Abuse: A Study of Adolescent Offenders

Researchers from the University of Minnesota are examining the unique and shared risk factors for perpetrating child sexual abuse, sexual assault, and delinquent behavior through a study of 300 adolescent males. The study explores attitudes toward intimate relationships, attitudes toward masculinity, and beliefs about sexuality.

Michael H. Miner, PhD 612-625-1500

For more information or additional copies of this document, please contact:

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